

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1511	70591	10/18/99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	1522	88518	1/26/00
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Final	Original	Date
1	1	1	1/2/01
2		2	7/23/99
3		3	6/20/99
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38	38	✓	
39	39	✓	
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43	43	✓	
44	44	N	
45	45	N	
46	46	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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